## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)		PAGE 1 OF 3 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼		
House Majority PAC		C C00495028		
Check if 24-hour report	eport Amends report fil	led on / / Y Y Y Y Y		
Full Name of Payee Gumbinner Davies & Simpson Communication	ons	Date of Public Distribution/Dissemination		
Mailing Address 2001 S St NW		10 03 2016		
Ste 301		Amount		
City State	Zip Code	21638.98		
Washington DC	20009-1164	Transaction ID: VN7GDA49VN0 Date of Disbursement or Obligation		
Purpose of Expenditure Direct Mail - Estimate	Category/ Type	M = M / D = D / Y = Y = Y		
Name of Federal Candidate	Support Of	fice Sought: 🗶 House District: 26		
Curbelo, Carlos, , ,	X Oppose	President Senate State:FL		
Calendar Year-To-Date Per Election for Office Sought	54097.45 Dis 20	sbursement For: Primary   General  Other (specify)   Other		
Full Name of Payee JVA Campaigns		Date of Public Distribution/Dissemination		
Molling Address		10 03 / Y Y Y Y Y		
Mailing Address 240 N 5th St		Amount		
Ste 360 City State	Zip Code	25150.63		
Columbus OH	43215-2600	Transaction ID : VN7GDA49VS1 Date of Disbursement or Obligation		
Purpose of Expenditure Direct Mail - Estimate	Category/ Type	M M / D D / Y Y Y Y Y		
Name of Federal Candidate	Support Of	ffice Sought:  House District: 03		
Young, David, , ,	X Oppose	President Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought		isbursement For: Primary		
(a) SUBTOTAL of Itemized Independent Expenditures	·····	46789.61		
(b) SUBTOTAL of Unitemized Independent Expenditures	·····			
(c) TOTAL Independent Expenditures	······································			
Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.				
	conically Filed] Date	10 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Signature				

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	LIVI EXI EIVE	HONEO		PAGE 2 OF 3 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼		
House Majority PAC				C C00495028		
Check if 24-hour report 🗶 48-hour report	X New rep	ort Amends repo		M / D = D / Y = Y = Y = Y		
Full Name of Payee Mack-Sumner Communications,	LLC			of Public Distribution/Dissemination		
Mailing Address 2001 N Beauregard St			Amou	10 03 2016		
Ste 420			711100			
City Alexandria	State Zip Code VA 22311-1750			23044.46 Transaction ID : VN7GDA49VV7		
Purpose of Expenditure Direct Mail - Estimate		Category/ Type		of Disbursement or Obligation		
Name of Fodoval Condidate						
Name of Federal Candidate  Knight, Steve, , ,		Support  Oppose	Office Sough Preside			
Calendar Year-To-Date Per Election for Office Sought		106273.34	Disbursemen 2016	t For: Primary X General		
	7 7			ther (specify) -		
Full Name of Payee The Strategy Group				of Public Distribution/Dissemination		
Mailing Address 730 North Franklin Street			Amou	10 03 2016		
Suite 404			Amou	in.		
City	State	Zip Code		23853.80		
Chicago	IL	60654		ction ID : VN7GDA49VY1 of Disbursement or Obligation		
Purpose of Expenditure Direct Mail - Estimate		Category/ Type	N	M / D D / Y Y Y Y		
Name of Federal Candidate		Support	Office Sough	t: Nouse District: 05		
Garrett, Scott, , ,		<b>X</b> Oppose	Preside	ent Senate State: NJ		
Calendar Year-To-Date Per Election for Office Sought		1594247.65	Disbursemen 2016	t For: Primary <b>X</b> General ther (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expen	ditures		•	46898.26		
(b) SUBTOTAL of Unitemized Independent Exp	enditures		·· •	7 1 7 1 4		
(c) TOTAL Independent Expenditures			-			
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any car party committee) any political party committee or	ndidate or authorized					
Lapp, Alixandria, , ,	[Electron	nically Filed] Date	e 10	05 / 2016		
Signature						

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 3 OF 3 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
House Majority PAC	C C00495028
	O
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee The Strategy Group	of Public Distribution/Dissemination
	10 03 2016
Mailing Address 730 North Franklin Street Amou	unt
Suite 404  City State Zip Code	24405.40
	31105.40 saction ID : VN7GDA49WS4
Purpose of Expanditure	of Disbursement or Obligation
Direct Mail - Estimate  Category/ Type	M   M
Name of Federal Candidate Support Office Soug	ht: X House District: 22
Tenney, Claudia, , ,	dent Senate State: NY
Calendar Year-To-Date Per Election for Office Sought  Disbursement 2016	, ,
	Other (specify) ▶  of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	
Amo	unt
City State Zip Code	
Date	of Disbursement or Obligation
Purpose of Expenditure Category/	M M / D D / Y Y Y Y
Type	
Name of Federal Candidate Support Office Soug	ht: House District:
Oppose Presid	dent Senate State:
Calendar Year-To-Date  Disburseme	ent For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	31105.40
(b) SUBTOTAL of Unitemized Independent Expenditures	
(b) CODICINE OF CHIROMESO Massperioria Experioria Commission and C	77 77 77
(c) TOTAL Independent Expenditures	124793.27
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
Lapp, Alixandria, , ,  [Electronically Filed] Date 10	05 2016
Signature	